

Note: In order to complete this form, you will need to open this application in Adobe Reader version 8 or later. If you do not have Adobe Reader, you can download it for free by clicking [here](#).

## EMPLOYMENT APPLICATION



Applicant's Name

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Date of Application

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Position Applying for

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The Malvern School is an equal opportunity employer and does not discriminate on the basis of race, ethnicity, color, religion, sex, limited English proficiency, national origin, handicap, age, sexual orientation, marital status or political affiliation.

## PERSONAL INFORMATION

|                        |            |               |                       |
|------------------------|------------|---------------|-----------------------|
| NAME (LAST NAME FIRST) |            | REFERRED BY   |                       |
| PRESENT ADDRESS        | CITY       | STATE         | ZIP                   |
| PERMANENT ADDRESS      | CITY       | STATE         | ZIP                   |
| HOME PHONE             | CELL PHONE | EMAIL ADDRESS | BEST WAY TO REACH YOU |

## EMPLOYMENT DESIRED

|   |   |                |
|---|---|----------------|
| POSITION  | DATE YOU CAN START  | SALARY DESIRED |
| ARE YOU CURRENTLY EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO                      | IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO  |                |
| EVER APPLIED TO/EMPLOYED BY THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO | WHERE?  | WHEN?          |
| PREFERRED MALVERN SCHOOL LOCATION(S)<br>Select...   | AVAILABLE WORK SCHEDULE<br><input type="checkbox"/> MON <input type="checkbox"/> TUES <input type="checkbox"/> WED <input type="checkbox"/> THURS <input type="checkbox"/> FRI <input type="checkbox"/> PART-TIME<br><input type="checkbox"/> FULL-TIME |                |

## EDUCATION HISTORY

| NAME AND LOCATION OF SCHOOL                  | DATES ATTENDED | DID YOU GRADUATE? | MAJOR/SUBJECTS STUDIED |
|--|----------------|-------------------|------------------------|
| HIGH SCHOOL                                  |                |                   |                        |
| COLLEGE                                      |                |                   |                        |
| CDA PROGRAM, TRADE, BUSINESS SCHOOL OR OTHER |                |                   |                        |

## TEACHING CERTIFICATION YES NO

|   |
|---|
| IF YES, LIST STATE AND GRADE LEVEL/AREA |
|---|

## GENERAL

|   |
|---|
| SUBJECTS OF SPECIAL STUDY/RESEARCH WORK OR SPECIAL TRAINING/SKILLS/LANGUAGES SPOKEN |
|   |

## EMPLOYMENT HISTORY

(LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH THE MOST RECENT)

| DATE (MONTH AND YEAR) | NAME AND ADDRESS OF EMPLOYER   | PHONE NUMBER | SALARY | POSITION | REASON FOR LEAVING |
|-----------------------|--|--------------|--------|----------|--------------------|
| FROM                  |  |              |        |          |                    |
| TO                    |  |              |        |          |                    |
|                       | MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO |              |        |          |                    |
| FROM                  |  |              |        |          |                    |
| TO                    |  |              |        |          |                    |
|                       | MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO |              |        |          |                    |
| FROM                  |  |              |        |          |                    |
| TO                    |  |              |        |          |                    |
|                       | MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO |              |        |          |                    |
| FROM                  |  |              |        |          |                    |
| TO                    |  |              |        |          |                    |
|                       | MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO |              |        |          |                    |

## PROFESSIONAL REFERENCES

(PLEASE LIST 4 REFERENCES. DO NOT INCLUDE FAMILY MEMBERS)

| NAME | ADDRESS | PHONE NUMBER | RELATIONSHIP |
|------|---------|--------------|--------------|
| 1.   |         |              |              |
| 2.   |         |              |              |
| 3.   |         |              |              |
| 4.   |         |              |              |

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between The Malvern School and myself for either employment or the providing of any benefits. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon The Malvern School unless made in writing.

Additionally, I understand that any false answer or statements or implications made by me in this application or other required documents will be considered sufficient cause for denial of employment or discharge from The Malvern School. I agree to furnish such additional information and complete such examinations as may be required to complete my employment file. If hired, I understand that employment is for no definite period of time. I understand that I have the right to terminate my employment at any time for any reason and the company retains the same right.

I certify that, if employed, I will abide by all company rules and regulations.

I certify that I have read the above and that the statements I have made on this application are true and correct.

DATE

SIGNATURE

# EMPLOYMENT APPLICATION QUESTIONNAIRE

All applicants are asked to complete this questionnaire. Please be as specific as possible with your answers.

1. What does the term Developmentally Appropriate Practices mean to you?

2. Have you ever been part of a program that has undergone the NAEYC accreditation process? What was your role in the accreditation process?

3. What are three indicators of excellence you would look for in an Early Childhood program?

4. How can The Malvern School benefit by having you as part of our team?

5. List any memberships that you hold in a professional organization.

## Directions for submitting your completed Employment Application to The Malvern School:

- Email: click "Submit Now" to email the application to The Malvern School. Please click "YES" or "ALLOW" if an alert message appears.
- Mail: print the application. To mail to a specific school, find address on **School Locations** list or click on **Contact Us** for general inquiries.
- Fax: print the application and fax to 610.558.3900

You can save the data you typed into the Employment Application on your computer by clicking on the SAVE TO DESKTOP button prior to printing or submitting the form.